

**Arizona Cancer Coalition
Membership Form**

Comprehensive Cancer Control is a process achieved through a partnership of public and private stakeholders whose common mission is to reduce the overall burden of cancer. The Centers for Disease Control and Prevention defines Comprehensive Cancer Control as an “integrated and coordinated approach to reducing the cancer incidence, morbidity, and mortality through prevention, early detection, treatment, rehabilitation, and palliation”.

The success of Arizona’s comprehensive cancer control process depends on the commitment and involvement of a variety of partners who are willing to share their expertise, resources, and experiences.

If you are interested in being a part of the Arizona Cancer Coalition, please take a few minutes to complete the following information.

Name: _____
Title /Organization: _____
Address: _____
Phone Number: _____ Fax: _____
E-mail: _____

- ☐ Yes, I am interested in becoming a member of the Arizona Cancer Coalition, please add me to the list serve.
- ☐ Yes, I am already a member and I would like to renew my membership, please keep me on the list serve.
- ☐ No, I am not interested in becoming a member of the Arizona Cancer Coalition, please remove/do not add me to the list serve.

Please select the committee you are interested:

- ☐ Prevention ☐ Early Detection & Screening ☐ Research
- ☐ Health Disparities ☐ Diagnosis and Treatment ☐ Quality of Life
- ☐ Not interested in joining a committee. Please keep me on list serve.

I would like to:

- ☐ Attend Health Fairs ☐ Provide Meeting Room ☐ Assist with newsletter
- ☐ Provide human interest story(s)

Please send to: Arizona Cancer Control Program

150 N. 18th Avenue, Ste. 310

Phoenix, AZ 85007

Phone: 602-542-2808; **Fax: 602-542-0512**; email: sabolk@azdhs.gov

Web site: www.azcancercontrol.gov